

HUNTING GUIDE-OUTFITTER REPORT FORM

Arctic National Wildlife Refuge

Special Use Permit No. _____

Company Name _____

Permittee Name (printed) _____

Permittee Signature _____

Date Completed _____

Submit this form along with a copy of the State Hunt Record for each client. **DUE DATE: DECEMBER 31st.**

1. Client Name 2. Dates (including partial days) the client was on the refuge.*	Species Hunted	Number of Animal(s) Taken	Approx. Number of days species was hunted. (Note: client charges are not based on this information)	Average number of employees used on the hunt. (Note: charges are not levied for employees)
1.				
2.				
1.				
2.				
1.				
2.				
1.				
2.				
1.				
2.				

* Client charges for the entire contract hunt period (regardless of actual client activity) are based on the most expensive species hunted during the contract hunt period. Please ensure this report arrives by December 31st at the Arctic National Wildlife Refuge, 101 12th Ave., Room 236, Box 20, Fairbanks, AK 99701.